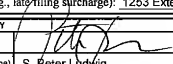
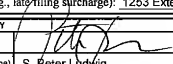
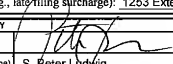


Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4518). <h2 style="text-align: center; margin: 10px 0;">FEE TRANSMITTAL</h2> <h3 style="text-align: center; margin: 0;">For FY 2008</h3>		<b>Complete if Known</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/518,801-Conf. #1323</td> </tr> <tr> <td>Filing Date</td> <td>January 26, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>Naoyuki Yamamoto</td> </tr> <tr> <td>Examiner Name</td> <td>Vera Afremova</td> </tr> <tr> <td>Art Unit</td> <td>1657</td> </tr> <tr> <td>Attorney Docket No.</td> <td>04703/020222-USO</td> </tr> </table>		Application Number	10/518,801-Conf. #1323	Filing Date	January 26, 2005	First Named Inventor	Naoyuki Yamamoto	Examiner Name	Vera Afremova	Art Unit	1657	Attorney Docket No.	04703/020222-USO
Application Number	10/518,801-Conf. #1323														
Filing Date	January 26, 2005														
First Named Inventor	Naoyuki Yamamoto														
Examiner Name	Vera Afremova														
Art Unit	1657														
Attorney Docket No.	04703/020222-USO														
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27															
TOTAL AMOUNT OF PAYMENT	(\$)	1,050.00													

<b>METHOD OF PAYMENT (check all that apply)</b>	
<input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	<input type="checkbox"/> Deposit Account            Deposit Account Number: <u>04-0100</u> Deposit Account Name: <u>Darby &amp; Darby P.C.</u>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>																			
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>																			
	FILING FEES		SEARCH FEES		EXAMINATION FEES														
		Small Entity		Small Entity		Small Entity													
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>												
Utility	310	155	510	255	210	105	_____												
Design	210	105	100	50	130	65	_____												
Plant	210	105	310	155	160	80	_____												
Reissue	310	155	510	255	620	310	_____												
Provisional	210	105	0	0	0	0	_____												
							Small Entity												
							Fee (\$)												
							Fee (\$)												
<b>2. EXCESS CLAIM FEES</b> <b>Fee Description</b>																			
Each claim over 20 (including Reissues)							50    25												
Each independent claim over 3 (including Reissues)							210    105												
Multiple dependent claims							370    185												
<b>Total Claims</b>		<b>Extra Claims</b>		<b>Fee (\$)</b>		<b>Fee Paid (\$)</b>													
2		- 20 =		x		=													
HP = highest number of total claims paid for, if greater than 20.																			
<b>Indep. Claims</b>		<b>Extra Claims</b>		<b>Fee (\$)</b>		<b>Fee Paid (\$)</b>													
1		- 10 =		x		=													
HP = highest number of independent claims paid for, if greater than 3.																			
<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																			
<b>Total Sheets</b>		<b>Extra Sheets</b>		<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>													
_____		- 100 =		/ 50 =		(round up to a whole number) x													
						<b>Fee Paid (\$)</b>													
<b>4. OTHER FEE(S)</b> Other (e.g., late filing surcharge): 1253 Extension for response within third month <span style="float: right;">1,050.00</span>																			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="text-align: center;">SUBMITTED BY</td> <td style="text-align: center;">Registration No.</td> <td style="text-align: center;">Telephone</td> </tr> <tr> <td style="width: 40%;">Signature</td> <td style="width: 20%;"></td> <td style="width: 20%; text-align: center;">25,351</td> <td style="width: 20%; text-align: center;">(212) 527-7700</td> </tr> <tr> <td>Name (Print/Type)</td> <td>S. Peter Ludwig</td> <td>Date</td> <td>February 29, 2008</td> </tr> </table>								SUBMITTED BY		Registration No.	Telephone	Signature		25,351	(212) 527-7700	Name (Print/Type)	S. Peter Ludwig	Date	February 29, 2008
SUBMITTED BY		Registration No.	Telephone																
Signature		25,351	(212) 527-7700																
Name (Print/Type)	S. Peter Ludwig	Date	February 29, 2008																